

**HONOLULU ETHICS COMMISSION**

925 DILLINGHAM BOULEVARD, STE. 190, HONOLULU, HI 96817

TEL: (808) 768-9242 FAX: (808) 768-7768

Email: ethics@honolulu.govWebsite: <http://www.honolulu.gov/ethics/>

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HONOLULU
ETHICS COMMISSION
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2020 REGISTRATIONLobbyist Registration
(Type or Print Clearly)**PART I LOBBYIST**

NAME (Last) (First) (Middle)

Gold Joy

LOBBYIST FIRM/EMPLOYER (if applicable)

Joy Gold Unlimited Inc

TELEPHONE

808-368-1146

MAILING ADDRESS (No. and Street or P.O. Box)

PO Box 88555

FAX

EMAIL joy@joygoldunlimited.com

(City)

Honolulu

(State)

HI

(Zip Code)

96830

PART II.A ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)

Dart Container Corporation

TELEPHONE

562-243-6433

MAILING ADDRESS (No. and Street or P.O. Box)

4000 Barranca Parkway

FAX

EMAIL jonathan.choi@dart.biz

(City)

Irvine

(State)

CA

(Zip Code)

92604

ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members)

☒ Not Applicable

METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS



☒ Not Applicable**PART II.B NO LONGER LOBBYING**☐ I am no longer authorized to lobby on behalf of the organization in Part II.A

DATE


PART III DESCRIPTION OF SUBJECTS ON WHICH YOU EXPECT TO LOBBY

<input type="checkbox"/> Business & Economic Development	<input type="checkbox"/> Community Services	<input type="checkbox"/> Customer Services
<input type="checkbox"/> Culture & Arts	<input type="checkbox"/> Housing	<input checked="" type="checkbox"/> Public Works, Infrastructure & Sustainability
<input type="checkbox"/> Parks & Recreation	<input type="checkbox"/> Public Health, Safety & Welfare	<input type="checkbox"/> Tourism
<input type="checkbox"/> Transportation	<input type="checkbox"/> Zoning & Planning	<input type="checkbox"/> Specific Legislation: <input type="checkbox"/> Additional Sheet(s) Attached Bill No. _____ (Year) _____ Reso No. _____ Admin. Rule No. _____ Dept. _____
<input type="checkbox"/> Other (indicate below): _____		

PART IV LOBBYIST CERTIFICATION

<i>I hereby certify that the foregoing statements are true and correct.</i>  _____ LOBBYIST SIGNATURE Jan 8 2020 _____ DATE	Subscribed and sworn to before me This <u>8</u> day of <u>JANUARY</u> , <u>2020</u> By:  JESSICA PAUPAW _____ NOTARY OR ANY OFFICIAL AUTHORIZED TO ADMINISTER OATHS My commission expires: <u>09/13/2020</u> L.S.
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PART V AUTHORIZATION TO LOBBY

NAME Jonathan Choi		Regional Manager, Wester Region, Gov Affairs & Environment
NAME OF ORGANIZATION (if applicable) Dart Container Corporation	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED	562-243-6433
MAILING ADDRESS (No. and Street or P.O Box) 4000 Barranca Parkway		FAX
		EMAIL jonathan.choi@dart.biz
(City) Irvine	(State) CA	(Zip Code) 92604
<i>I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.</i>  _____ (Signature of Authorizing Officer or Person Represented) <u>01/06/20</u> _____ (Date)		

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Joy Gold Unlimited Inc

TELEPHONE

808-368-1146

MAILING ADDRESS (No. and Street or P.O. Box)

PO Box 88555

FAX

EMAIL joy@joygoldunlimited.com

(City) Honolulu

(State) HI

(Zip Code) 96830

PART II.A ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)

KYD, Inc. dba: K Yamada Distributors

TELEPHONE

808-836-7301

MAILING ADDRESS (No. and Street or P.O. Box)

2949 Koapaka Street

FAX

EMAIL dy@kyd-inc.com

(City) Honolulu

(State) HI

(Zip Code) 96819

ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members)

☒ Not Applicable

METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS

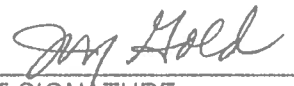


☒ Not Applicable**PART II.B NO LONGER LOBBYING**☐ I am no longer authorized to lobby on behalf of the organization in Part II.A

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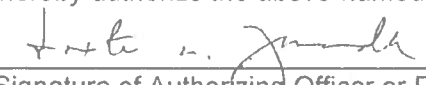
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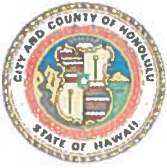
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PART V AUTHORIZATION TO LOBBY

NAME Dexter N. Yamada		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED President	
NAME OF ORGANIZATION (if applicable) KYD, Inc. dba: K Yamada Distributors		TELEPHONE 808-836-7301	
MAILING ADDRESS (No. and Street or P.O Box) 2949 Koapaka Street		FAX	
		EMAIL dy@kyd-inc.com	
(City) Honolulu	(State) HI	(Zip Code) 96819	
<i>I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.</i>  _____ (Signature of Authorizing Officer or Person Represented) <div style="text-align: right;">1-3-2020 _____ (Date)</div>			

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PO Box 88555

FAX

EMAIL joy@joygoldunlimited.com

(City)

Honolulu

(State)

HI

(Zip Code)

96830

PART II.A ORGANIZATION

NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)

Meadow Gold Dairies - Hawaii

TELEPHONE

808-944-5911

MAILING ADDRESS (No. and Street or P.O. Box)

925 Cedar Street

FAX

EMAIL Glenn_Muranaka@deanfoods.com

(City)

Honolulu

(State)

HI

(Zip Code)

96814

ESTIMATED NUMBER OF MEMBERS (if lobbying on behalf of members)

☒ Not Applicable

METHODS USED BY MEMBERS TO MAKE POLICY DECISIONS




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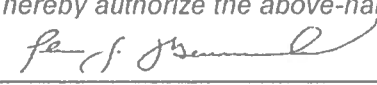
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PART V AUTHORIZATION TO LOBBY

NAME Glenn K. Muranaka		TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED President and General Manager	
NAME OF ORGANIZATION (if applicable) Meadow Gold Dairies - Hawaii		TELEPHONE 808-944-5911	
MAILING ADDRESS (No. and Street or P.O. Box) 925 Cedar Street		FAX	
		EMAIL Glenn_Muranaka@deanfoods.com	
(City) Honolulu	(State) HI	(Zip Code) 96814	
<i>I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.</i>  _____ (Signature of Authorizing Officer or Person Represented)			
		<u>01/03/20</u> (Date)	